Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			197					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			19 minus 20=		• 0			X\$ 9=	0	OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		0			X43=	0	OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT		_			+145=	0	OR	÷290=	
* 11	the difference	e in column 1 is	less than ze	ero, enter	"0" in (column 2	i	TOTAL	380	OR	TOTAL	
CLAIMS AS AMENDED - PART II								ــــــــــــــــــــــــــــــــــــــ	_	OTHER		
(Column 1)			(Colum			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		XS 9=		OR	X\$18=	
	Independent	*	Minus	***		= .		X43=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF M	JETIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL			TOTAL	
								DDIT. FEE		OR ,	ADDIT. FEE	
_	···	(Column 1) CLAIMS	17.1	(Colum		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL DDIT. FEE			TOTAL ADDIT. FEE	-
		(Column 1)		(Colum	n 2)	(Column 3)		, ,		•	ADDII. FEEL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* . ,	Minus	**		=		X\$ 9=		OR	X\$18=	•
	Independent	*	Minus	***		=	r	X43=		OR	X86=	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			+290=	
• 11	• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	TOTAL	
	f the "Highest Nut	mber Previously Pai mber Previously Pa ber Previously Paic	id For" IN THIS	S SPACE is	less than	n 3, enter "3."		TOTAL DOTT. FEE	ropriate box		DDIT. FEE L	